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JAN 18 2006

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 4058
 Name: American Warrior, Inc.
 Address: P. O. Box 399
 City/State/Zip: Garden City, KS 67846
 Purchaser: _____
 Operator Contact Person: Joe Smith
 Phone: (620) 275-2963
 Contractor: Name: Berentz Drilling Company, Inc.
 License: 5892
 Wellsite Geologist: Steven P. Murphy, PG
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

12-19-05	01-02-06	01-02-06 PLG
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23,122-00-00
 County: Graham
NE NW NW Sec. 5 Twp. 8S S. R. 21 East West
400 FNL feet from S / N (circle one) Line of Section
920 FWL feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Weigang Well #: 1-5
 Field Name: _____
 Producing Formation: Luckne
 Elevation: Ground: 2121.5' Kelly Bushing: 2126.5'
 Total Depth: 3735' Plug Back Total Depth: N/A
 Amount of Surface Pipe Set and Cemented at 208' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 3610
 feet depth to Alt 2 - Dig - 10 1/2' / 215 sx cmt.
Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 3,000 ppm Fluid volume 400 bbls
 Dewatering method used Evaporation
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]
 Title: Compliance Coordinator Date: 1-14-06
 Subscribed and sworn to before me this 14th day of January,
 20 06
 Notary Public: [Signature]
 Date Commission Expires: 09-12-09

ERICA KUHLMIEER
 Notary Public - State of Kansas
 My Appt. Expires 09-12-09

KCC Office Use ONLY
NO Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: American Warrior, Inc. Lease Name: Weigang Well #: 1-5
 Sec. 5 Twp. 8S S. R. 21 East West County: Graham

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Computer Processed Interpretation, Microresistivity Log, Borehole Compensated Sonic Log, Dual Compensated Porosity Log, Dual Induction Log,

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
	Name Top Datum	
	Anhydrite 1712 +415	
	B. Anhydrite 1746 +381	
	Topeka 3100 -973	
	Heebner 3309 -1182	
	Toronto 3321 -1194	
	Lansing 3344 -1217	
	BKC 3546 -1419	
	Arbuckle 3660 -1533	

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface Pipe	12-1/4"	8-5/8"	23#	208'	Common	160 sx	3 % cc & 2 % gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	D & A		

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
N/A	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	N/A	N/A	N/A		

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) _____	

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 KCC WICHITA

ALLIED CEMENTING CO., INC.

22621

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Great Bend
12-20-05

DATE <i>12-19-05</i>	SEC. <i>5</i>	TWP. <i>8</i>	RANGE <i>21W</i>	CALLED OUT <i>9:30 AM</i>	ON LOCATION <i>1:00 PM</i>	JOB START <i>1:00 AM</i>	JOB FINISH <i>2:00 AM</i>
LEASE <i>Wiegand</i>	WELL # <i>1</i>	LOCATION <i>Bogue 3N/W 5/5</i>			COUNTY <i>Marion</i>	STATE <i>K.S.</i>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR *M + B Rig 6*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *208 ft*

CASING SIZE *8 1/2* DEPTH *208 ft*

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. *15 ft*

PERFS. _____

DISPLACEMENT *12 bbl*

EQUIPMENT

PUMP TRUCK CEMENTER *M. Ho M.*

120 HELPER *Rick H.*

BULK TRUCK

342 DRIVER *Steve T.*

BULK TRUCK

_____ DRIVER _____

REMARKS:

*Circulate hole with Pump Truck
mix cement + Release Plug Displ.
Plug Down with water*

*Cement did Circulate to
Surface*

CHARGE TO: *American Warrior Inc*

STREET _____

CITY _____ STATE _____ ZIP _____

OWNER _____

CEMENT AMOUNT ORDERED *160 Common*

38 cc 28 gal

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

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SERVICE

DEPTH OF JOB *208 ft*

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

1-8 1/2 wooden plug @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE *[Signature]*

[Signature]
PRINTED NAME

ALLIED CEMENTING CO., INC. 25775

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Russell
1-2-06

DATE <u>1-1-06</u>	SEC <u>5</u>	TWP. <u>8</u>	RANGE <u>21</u>	CALLED OUT <u>11:00 AM</u>	ON LOCATION <u>12:45 AM</u>	JOB START	JOB FINISH <u>5:20 PM</u>
LEASE <u>W19499</u> WELL # <u>B 1</u>				LOCATION <u>Bogus 2N</u>		COUNTY <u>Graham</u>	STATE <u>KN</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR MJB
 TYPE OF JOB Plug
 HOLE SIZE 77 T.D. 3735
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT AMOUNT ORDERED 215 pk 6400 64.00 1/4 # F10
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER Bill
 # 409 HELPER Craig
 BULK TRUCK
 # 213 DRIVER Doug
 BULK TRUCK
 # _____ DRIVER _____

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HANDLING _____ @ _____
 MILEAGE _____ @ _____

REMARKS:

1st plug c 3670 w/ 25pk
2nd plug c 1715 w/ 25pk
3rd plug c 1150 w/ 100pk
4th plug c 250 w/ 40pk
5th plug c 40 w/ 10pk
15pk Rathole

TOTAL _____

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD 1-35 wood _____ @ _____
 _____ @ _____

CHARGE TO: American Warrior
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TOTAL _____

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME _____

ALLIED CEMENTING CO., INC. 25775

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Russell
1-2-06

DATE <u>1-1-06</u>	SEC. <u>5</u>	TWP. <u>8</u>	RANGE <u>21</u>	CALLED OUT <u>11:00 pm</u>	ON LOCATION <u>12:45 Am</u>	JOB START	JOB FINISH <u>5:22 PM</u>
LEASE <u>W19499</u>	WELL # <u>1</u>	LOCATION <u>Bogue 2N</u>			COUNTY <u>Graham</u>	STATE <u>KN</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR MJB
 TYPE OF JOB Plug
 HOLE SIZE 7 1/2 T.D. 3735
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT AMOUNT ORDERED 215 ct 6400 64.62 1/4 # F10

COMMON	@	_____
POZMIX	@	_____
GEL	@	_____
CHLORIDE	@	_____
ASC	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
HANDLING	@	_____
MILEAGE	@	_____

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EQUIPMENT

PUMP TRUCK CEMENTER Bill
 # 409 HELPER Craig
 BULK TRUCK
 # 213 DRIVER Doug
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

1st plug c 3670 w/ 25 sbv
2nd plug c 1715 w/ 25 sbv
3rd plug c 1150 w/ 100 sbv
4th plug c 250 w/ 40 sbv
5th plug c 40 w/ 10 sbv
15 sbv Rathole

SERVICE

DEPTH OF JOB	_____
PUMP TRUCK CHARGE	_____
EXTRA FOOTAGE	@ _____
MILEAGE	@ _____
MANIFOLD	@ _____
<u>1-35 wood</u>	@ _____
_____	@ _____

CHARGE TO: American Workman
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

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SIGNATURE [Signature]

PRINTED NAME _____